FOR INSTRUCTIONS, SEE BACK OF FORM	FORM
DISCLOSURE SUMMARY PAGE PM71408	DR-2 DISCLOSURE REPORT
	For Office Use Only
COMMITTEE NAME (Must be same as on Statement of Organization)  Committee NAME (Must be same as on Statement of Organization)  IMPORTANT: Indicate type of committee you are reporting for:	Comm. # 950 Indexed S
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support Slate of Candidates	Computer
Caroly K. Tallett 243-1193 (563	7-14-08 DATE SIGNED
SIGNATURE OF THEASURER (or person filing this report) TELEPHONE	DATE SIGNED
Routine Penalties Due For Late Filed Reports Range from	\$20 to \$800
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:	
I AM FILING A Suly 14, 2008 REPORT FOR AN/A (1) ELECTIO Indicate	N /(2)NON-ELECTION YEAR.
CHECK IF AMENDMENT TO REPORT DATED Local (	Committees, enter Date of Election
	y & Local Committees, enter County in Election is held
OTATEMENT OF GAGILON HAND	
STATEMENT OF CASH ON HAND	
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period,	s 860.67
or must be zero if this is first report filed.)	\$
ADD TOTAL MONEY TAKEN IN THIS PERIOD	2105.00
Schedule A: Cash Contributions total (Attach Schedule A)	
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
(Schedule H applies to Candidates' Committees Only)	. 901517
SUB-TOTAL MONEY SPENT THE PERIOD	\$ <u>2965.67</u> 953.22
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	953.22
,	
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$ 2,012.45
UNPAID BILLS (From Schedule D - Attach Schedule D)	
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	S

Reset Form **CONTRIBUTIONS -- MONEY TAKEN IN** MONETARY (Rev. 07/03) RECEIPTS (Including candidate's personal funds) CHECK THIS BOX IF COMMITTEE NAME (Must be same as on Statement of Organization) AMENDING FORM

SCHEDULE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF THE PROPERTY OF THE PROPER			
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	NUMBER		(* 5,7,7		INCOME
6/30/	ID#	Sandra Land Street 2008	Dues	\$ -00	
108	ID#	Clinton Ja 52732		15.00	<u> </u>
5		Daris Caretensen River	v Best	6000	
	CK#	Clinton & 52732 Day	s /ichiti		
(	ID#	Barbara Kraumen	2008 Dues		
	CK#	4086-170 th St. 7	10 º dont	25.00	
	ID#	4 2 3 2 3 2	+ 12		
	CK#	259 Cragner July	3 after	24 00	7
61	ID#	A CA	- 0 .		
9/30/08	CK#	1321-5 thanks in	I July 3, while 10	2600	
71	ID#	De Miskenson	T: 1		$\overline{}$
3/08	CK# C	48 N. 10th la 52732 Aft	whit	12.00	V
	ID#	9. O. 14	avene -		$\rightarrow$
	CK#	3614-9th St. Carranche, Ja 52730-960	2 leckets	5000	
	ID#	D. +1 C.	, amalia	,	
)	CK#	2337 Lifente kreace	1 ticket	1200	
	ID#	N			$\rightarrow$
	CK#	16 40 Fairway Dr. Clinton Ja 52732	1 ticket	1200	7
	ID#	01:			_
5	CK#	Chiefer, Jat thank.	tichets est donates	~48.00	
			SUB-TOTAL	```	
		TOTAL (if last page of		\$318 00	
		TOTAL (II last page t	n ans scriedule)		

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

### Reset Form

### CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Committee NAME (Must be same as on Statement of Organization)
Clinton County Republican Women Club

SCHEDULE		
<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS	
CHECK THIS BOX IF AMENDING FORM		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE	I DAG ID NI WARED				
RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK		(if applicable)	RECEIVED	RAISER
	NUMBER	2			INCOME
7/2	10#	Fatricia Tarsoni	2 tick to	·	
73/08	CK#	1603 5. Washington Blus	Co July 3	24,00	
700	15.	Camarche, La 52730	12 ech	27,	\
	ID#	Same Walkers and	1 ticket		
	CK#	322-3rd ave no.	MERIC	12 ==	
		Clinton Je 52732		, —	
	ID#	Susa Dua and	-+-0 4		
)	CK# -	600-5thaneso, -	5 tickets	100	
/		600	a Hen.	60 00	
	ID# \$6.7	and the start	114 0		
. (	CK# 58	2 Blog Par +D	Hickete	10,00	
	CIX#	lintall 52732	@12,00 en	48.	
1	ID#	2/30		<b> </b>	
/	C)/#	arrell Smith	Ticheta	- 00	$    \setminus  $
	CK#	for Kingicrash		50-	
_/	ID#	Clinthe Je52732 B	estdonello		
		1140 Wood Ost	Michet	1000	
\	CK#			12.	
<del></del>	ID#	Clinton, Sa 52732			
	J	Caraly drimer.	it of		
	- СК#	530-30thaver.	4 techets	48.00	<u>                                   </u>
	ID#	Chita Je 52732		9	
- / -	. L	Diane Cassalay &	to 3 after to	erele	
	CK#	3110 Hartomile Rd. 012	Suchete	4000	
	ID#	Clinton le 52732	Donation	,	
	#טוי	Kan Harald	11+14		
)	CK#	1926 Hisklandet.	Juchiles	4000	
		Clinton Ja 5 2732	72.00 en	10.	L
/ /	ID#	Jame Shielle	2 t. OA		
( )	ск# 0	436 mill RityRl.	3 makes	3600	
		Clento de 52732	12.00 en	06	
			SUB-TOTAL	25 45	
				\$378.00	
		TOTAL (if last page	of this schedule)		
• Providence of				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_

# Reset Form

SCHEDULE

MONETARY

## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
Committee NAME (Must be same as on Statement of Organization) Clinton Country Republican Comers Click	, —	CK THIS BOX IF

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER		TO CANDIDATE* (if applicable)	RECEIVED	FUND RAISER
	ID#	62-101	81 -1		INCOME
7/7/08	CK#	1121-26 th ane No. Clinton & 52732	fuction July 3	\$ 00	
\	ID#	La Lat	Sil +		
	CK#	538-39 th anello	July 3,08	74.00	
	ID#	Patty Brakley	1.63 #	· · · · · · · · · · · · · · · · · · ·	
	CK#	Clinton Se 52732	Relesit	26.00	
	ID#	Caralina Dante	July 3		7
	CK#	131501.3 Clinton, la 52732	Ductin	20.00	
	ID#	itual in	Tilent auch	in	
	CK#	1921 Highland Court Clinton Ja 52732 2	196.00	220.00	V
	ID#	9 T. 1+	ed 13		
	CK#	Camarche Sa 52730	auction	35.00	L
	ID#	Paris Parit	D^a 4-		7
M3 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	СК#	126 Schick Rd. Clinton Ja 52732	Luction	35.2€	
	ID#	Paris C. I	D'in to		
	CK#	726 Schick Rd. Clentin Ju 52732 Ja	Buction the Flant	5.00	
	ID#	Kan Hakall.	19 cy 3		
	CK#	1926 Highland et. Clinton In 52732	tuction	30.00	
	ID#	nicole Balen	1.1. +		
	CK#	1712-9 a St. 71.ω. Clinta & 52732	Quetion	25.00	V
1		,	SUBITOTAL	117000	
		TOTAL (if last page	of this schedule)	\$478.00	
* Disclosure law requ	uires candidate committee		o ooncaute)	\$	

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 4 (for Schedule A)

### Reset Form

SCHEDULE

MONETARY

### CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

(Rev. 07/03) RECEIPTS

COMMITTEE NAME (Must be same as on Statement of Organization)

Linton County Resublican Women Clab

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF ASSESSED			
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
7/3/08	CK#	Sure Casalog &	ilent	123.00	\ <u>\</u>
7/2	ID#	Clinton Ja 52732	D. 4		
7/08	CK#	1001-2mlane Sa (Clinton Se 52732 at	water	62.00	
7/2/	ID#	Cash received from 7-3-08 Wester Para Le Quent: 60 tichile	1 / 3 Event	-1100	
108	CK#	Alter Para de Quenti do Tichela	1. don	746.°°	
	ID#				
	CK#				
	ID#				
	CK#				
	ID#			, <u>.</u>	
	CK#				
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	-CK#		ne district the switch assess a second assessment as a super-	· many () man a	
	ID#				
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	ID#				
	CK#		İ		
	ID#				
	CK#				
			SUB-TOTAL	05,00	

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Page 4 of (for Schedule A)

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES	
CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must be same as on Statement of Organization) CANDIDATE ID NUMBER NAME AND ADDRESS TO WHOM **PURPOSE AMOUNT** DATE **EXPENDITURE** (DESCRIBE TRANSACTION) **EXPENDED EXPENDED** (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER 3rd Street CK# /329 CK#/330 6/17/08 ID# 46.50 CK# /33/ ID# CK#/332 ID# CK#/333 ID# CK# ID# CK# ID# CK# SUB-TOTAL TOTAL (if last page of this schedule)

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page \_\_\_\_\_ of \_\_\_\_